



Using Evidence-Supported Practices and Individualizing Interventions

Module 10 Script

Slide 1: Introduction to Module 10

Welcome to the tenth and final module of the Promoting Positive Pathways to Adulthood Training Series, which is being brought to you by the Research and Training Center on Pathways to Positive Futures at Portland State University.

The goal of the training program is to prepare service providers working with young people aged 14-29 with mental health difficulties to more effectively promote their positive transition to adulthood.

We have created ten hour-long modules based on a set of core competencies developed by the Pathways Transition Training Collaborative, which is an advisory committee of young adults, family members, practitioners and researchers. The tenth module focuses on the distinctive and common features of best practices in interventions with young people based on positive youth development and cultural preferences, and the importance of evaluating programs in partnership with young people. At the conclusion of each slide, the marker labeled “onward” will be flashing. Please click on the marker “onward” to advance to the next slide.

Slide 2: Focus of Module 10

The tenth module, *using evidence-supported practices and individualizing interventions*, focuses on improving services offered to emerging adults by incorporating practices based on sound evidence from research studies. We also argue that the interventions we offer must be individualized, based on the preferences of the young people being served, and their cultural background. Finally, we discuss the importance of partnering with young people as we evaluate the effectiveness of the services, and improve their quality. The tenth module is based on the sixth and tenth core competencies for service providers.

Slide 3: Competencies for Module 10

Module 10 addresses Competency 6, using evidence-supported practice and individualizing interventions.

This means that the service provider:

- Locates, appraises, adapts, and applies established and evolving knowledge about mental health and a range of effective practices and programs.

- Is open to new evidence of program and practice effectiveness, and values societal, cultural, ethnic, gender, and other sources of diversity, which affect the use of this evidence.
- Takes culture and environment into account, and identifies, evaluates, and adapts a range of evidence-supported practices and programs that meet the needs of young people who have experienced mental health difficulties.

We also consider Competency 10, evaluating and improving services. Service providers who have this competency:

- Systematically evaluate the services that they offer;
- Use feedback from young people and their family members, and
- Participate in program evaluations and research to improve their services.

Slide 4: Using Evidence Supported Practices – 4 sections

In this module on *using evidence-supported practices and individualizing interventions*, you will learn to:

1. Locate, adapt, and incorporate new knowledge to build services that are evidence-based,
2. Understand the distinctive and common features of best practices based on positive youth development,
3. Adapt services based on cultural preferences and individual circumstances of emerging adults, and
4. Develop knowledge and skills to evaluate and improve programs in partnership with young people and when appropriate, their family members.

Slide 5: 10.1 – Locating, Adapting, and Incorporating New Knowledge to Build Services that Are Evidence-Based

In the first segment of this module, we will discuss current thinking on evidence-based practices, talk about strategies to build an evidence base to support your work, give some examples of evidence-based programs, and discuss the importance of incorporating young people’s preferences and values into the services we offer.

We should acknowledge that the term “evidence-supported treatments” has been used to identify interventions that have produced positive outcomes in repeated tests using well-controlled research procedures. While all “evidence-based programs or practices” have accumulated some research support, they may not have reached the highest standard of convincing evidence (Walker et al., 2007).

It is important for service providers to be familiar with an array of evidence-informed programs and practice elements that can be selected, adapted, and offered to young people with mental health challenges (Bernstein et al., 2015).

Slide 6: What is the Process of Evidence-Based Practice?

Evidence-based practice is the selection and implementation of research-supported interventions, a decision-making process that involves integrating critical evaluation of available research with service provider knowledge and experiences, and client values (McBeath, Briggs & Aisenberg, 2010; Parrish, 2018).

Rubin and Parrish (2007, p. 407; Parrish 2018) suggest that there are five steps to the process of evidence-based practice:

1. First, formulating an answerable question regarding practice needs. Suppose you are working with Sherry, a young person who has recently turned 18 and left foster care. She has been experiencing mental health difficulties and has dropped out of school. You might ask: “How can I engage Sherry in mental health treatment services, and help her to move forward toward her goals?”
2. The second step is tracking down the best evidence to answer that question. With this young person in mind, you might find programs that have evidence that young people engage in services long enough to have positive outcomes, and successfully connect with educational services, if that is Sherry’s goal.
3. Next, you’d look at the research evidence of program effectiveness and assess the usefulness of the evidence for the young person you are serving. Here you might look into the successful programs or interventions you found and determine whether they were effective for a young woman transitioning out of foster care, like Sherry.
4. Then, you take your own experience and the preferences and values of the young person and their circumstances into account. You might tell Sherry about evidence-based programs available in your community that she might participate in that you can support and that may help her reach her goals, and ask her what sounds most appealing to her and which she thinks would be helpful (Gambriel, 2018).
5. After Sherry’s completion of the program, you evaluate the outcomes of services. To conclude your work with Sherry, you might determine whether she stayed in services long enough to support her recovery, and was able to successfully engage in education, if that turned out to be in line with her goals. You might also reach out to Sherry to get her perspective on what was effective for her, what did not work from her perspective, and what needs to be changed to better serve other young people.

Slide 7: Building an Evidence Base

Most programs currently designated as “evidence-supported treatments” for emerging adults with mental health conditions were developed for other age groups, and their effectiveness was tested with older adult or child populations. This testing usually involves studies in which people receiving treatment are compared with others in control groups who either received usual services or were on a wait list for services. In module 2, we talked about Cognitive Behavior Therapy, Motivational Interviewing, and Dialectical Behavior Therapy as examples of treatment models that have proven effectiveness with adults and that are in use with young people. Children’s mental health approaches such as Wraparound Services and Multisystemic Therapy have also been used with emerging adults.

Evidence-supported services that are adapted for use with emerging adults may have positive results with young people, but they still need to be tested with this age group. (Davis, Koroloff, & Ellison, 2012). Because there can be considerable differences between adolescents and young adults, the practices may also need to be tested in such a way that outcomes for older and younger emerging adults can be compared.

Finally, services are being designed specifically around the developmental needs of young adults. Some of these services are being tested for effectiveness using rigorous research designs, and practice models are being developed.

Slide 8: Emerging Evidence-Based Interventions

Work is ongoing to develop new interventions or successfully modify research-supported interventions to better meet the needs of emerging adults. Four programs have recently been tested with youth and young adults and accumulated substantial evidence

- The **Transition to Independence** (or the TIP Model) is based on a positive development model of partnership between a transition facilitator and a young person, identified family members, and other supportive people, to work toward that young person's goals in transition domains such as education, employment, parenting, and community living. It has accumulated substantial evidence of its successful implementation and positive outcomes for young people being served (Dresser, Clark, & Deschênes, 2015; Stein, Connors, Chambers, et al. 2016).
- **Better Futures** uses a program model that is designed to empower and support young people in foster care who have serious mental challenges as they enter post-secondary education. This program includes individualized coaching and mentoring from near-peers to improve self-determination skills. A recent study using randomized assignment to Better Futures or usual services showed significant gains in post-secondary education, participation, hope, self-determination, and empowerment for Better Futures participants (Geenen, Powers, Phillips, et al. 2015; Phillips, et al., 2015).
- **Multisystemic Therapy for Emerging Adults** (or MST-EA) was developed and tested for use with young people who have recently been involved with the justice system and who have serious mental health conditions. Recent research comparing pre-treatment to post-treatment scores found reduced mental health symptoms, diminished justice system involvement, and fewer associations with antisocial peers for those in MST-EA (Davis, Sheidow, & McCart, 2015; also see Davis et al., 2018; Sheidow et al., 2016).
- **Individual Placement and Support** (or IPS) integrates supports for the education and employment efforts of young people, and includes peer mentorship, and career development (Ellison et al., 2015). This approach has been specifically adapted for young adults and focuses on supporting them to take on the challenges that they encounter as young people, responds to their changing needs and goals, helps them gain needed skills, and remains flexible about the communication methods they use including technology (Ellison et al., 2019). This approach has resulted in better employment outcomes for transition aged young people enrolled receiving IPS, compared with those receiving usual vocational services (Bond et al. 2016); or treatment as usual (Killackey et al., 2019).

Slide 9: Positive Youth Development Approaches

All four of the Evidence-Based Interventions we've just discussed: Transition to Independence, Better Futures, Multisystemic Therapy for Emerging Adults, and Individual Placement and Support take a positive youth development (or PYD) approach for young people with mental health challenges.

In Module 1, on partnering with youth and young adults, we discussed positive youth development as important for successful work with emerging adults, including those who are experiencing mental health difficulties. Positive development approaches focus “on actively promoting thriving and well-being

across the life span” (Walker & Gowen, 2011) and do not place their primary attention on young people’s deficits and problems. According to Richard Lerner and his collaborators, “a young person may be said to be *thriving* if he or she is involved over time in...healthy, positive relationships with his or her community, and on the path to...an adult status marked by making culturally valued contributions” to his or her own life, others’ lives, and their social environment (Lerner, Brentano, Dowling, & Anderson, 2002, p. 15). Service providers coming from a PYD approach acknowledge that positive development is a process that individuals go through over time, and that involves selection of goals, action, self-regulation, strategic thinking, adaptation, and complex changes that help young people fulfill their purposes (Lerner, 2015; Lerner et al., 2018). This approach also involves working from an understanding of the changing relationship of individuals with their context across time and place (Lerner, 2015), and recognizing that this relationship is bi-directional. The young person and the context (including their family, peer group, culture, and social institutions) are not only related, they influence each other.

Slide 10: Pathways Model of Positive Youth Development

In module 1, we discussed a model of Positive Youth Development approaches developed by Janet Walker and her collaborators at the Pathways Research and Training Center.

Work begins by partnering with a young person to promote such key capacities as:

- Being the driver of his or her own positive development;
- Engaging with people, communities, cultural groups, organizations, and systems that provide opportunities and supportive life contexts;
- Being proactive—that is, seeking out opportunities to grow as a person; and finally,
- Being able to push ahead despite challenges and maintain fortitude (meaning strength despite adversity).

These capacities lead to positive outcomes such as increased:

- Skills and knowledge for adult roles (including educational and vocational skills, and ability to promote their own health and mental health);
- Ability to meet basic needs for housing, health, and safety; and
- Positive connections to community, culture, and society (leading to positive relationships, work, play, and civic engagement).

The circling arrows [in the diagram] link Key Capacities and Outcomes with the positive identity, values, commitments, and self-efficacy of the young person. These arrows complete the illustration of a virtuous cycle between capacities and outcomes that leads to positive development of the young person.

Slide 11: Developing a Theory of Change from the PYD Perspective

The Pathways model was further developed through an evidence-supported process to present a theory of the ways in which PYD *interventions* work.

The process involved:

- A review of the research literature on positive youth development and evidence-based programs that serve emerging adults with mental health difficulties.
- Interviews with service providers and administrators from programs that incorporated research-supported interventions.
- Interviews with young people who had experienced services from these programs.
- Analysis and review of major emergent PYD practices by providers, administrators, young people with service experience, and family members.
- Development of a theory of change for PYD programs and interventions—that is, an explanation of how PYD interventions work to produce desired outcomes was developed (Walker, 2015; Walker & Flower, 2016).

The goal of developing the model was to provide a theory that will guide service providers who wish to use evidence-supported practices to promote positive development in young people who have experienced mental health challenges (Walker et al., 2013).

In the following Video clip, Janet Walker discusses the development of the Pathways model.

Slide 12: Janet Walker on Developing the PYD Model [Video Clip]

The things that we realized as we started working on that [model] was that the interventions that have been developed and that were successful for this population all shared an underlying kind of key approach and ingredients, which may be partially, or maybe in a large part, due to the fact that young people won't come back to an intervention that they don't find relevant—or that they find in some way kind of aversive in some manner. So maybe it's no accident that the ones that survived and were able to keep engaging young people had certain features in common. And the main way that we categorize those features is that they're very oriented towards *positive development*. And so that the emphasis is on the *goals* that the participant finds personally meaningful, and helping to make progress on those goals. They tend to be very focused on *strengths* and *competencies* as opposed to deficit symptoms, etc. And the idea is that if you get going in your life, your mental health will improve, rather than waiting around for your mental health to improve before you get going on life, which we know is as an approach that really doesn't work very well. So I would say that was sort of the underlying basic theme. And then we try to take that and distill it into more specific information about what exactly are these programs promoting, and how do they work? And that was what we encapsulated in the first version of the model.

After that, we went out to academic experts and asked them to take a look at the model and to give us their suggestions for how to improve it. And so we worked with people who were considered experts in either the developmental period of *emerging adulthood* per se, and/or mental health approaches that had some level of proof for their effectiveness for the population. So we took all of that feedback and we combined it, and then at the same time, we were also interviewing people who provided mental health treatment and who were considered to be particularly effective. So we did a sort of outreach to programs that were effective, and asked them to identify an effective provider. So we interviewed those folks at the same time to see if we could kind of drill down into very specific examples of what it was that they were doing that they thought was most effective, kind of use all of that information to match up against the model, hopefully to enrich the model, and then to start building, some information about

exactly what kind of guidance can this model—that's a theoretical model after all—what can it do to provide information that's really useful to practitioners so that they can do their work better.

Slide 13: Importance of the Young Person's Preferences and Values for EBP

As Janet Walker emphasized in the video segment, service providers must take the preferences and values of young people into account as they design and deliver person-centered services. This is very much in line with the principles of evidence-based practice, which center service user values in service delivery (Gambril, 2018).

There are several advantages to asking young people about their perspectives:

- As part of the developmental process, in which young people learn to exercise personal agency and make pro-social choices, they need to develop attitudes and skills that help them to discover and express their preferences and values (Sanders, Munford, Thimasarn-Anwar, Liebenberg, & Ungar, 2015).
- As individuals with their life history and context, they may engage differently with interventions than other emerging adults and will have better outcomes when services are tailored for their specific needs (Stein et al., 2014). This may be especially true for young people who have had experience in systems that focus on compliance and highly structured interactions, such as the justice system or child welfare.
- Asking them for their guidance about their preferences and finding out what is working for them can help individualize and improve services (Stein et al., 2014).

In the next video segment, youth advocate Lacy Kendrick-Burk discusses the importance of having young people's input into service development.

Slide 14: Lacy Kendrick-Burk on Youth Voice in Service Development [Video Clip]

One of the most important things that service providers can do for young people is to *listen*, and to listen to young people—what they want. Young people are going to tell you. It might not always be in ways that you're ready to hear. And so make sure to listen to their words as well as their actions. Create those opportunities where young people have an opportunity to use their voice in a way that's safe and in a way that will be utilized. Young people want to help, and they want to hear and see where their voice is being utilized.

Some of the other things that providers can do is to make sure to meet young people where they are, and that might be time and location, and it might also be where they are in their personal development process; to help find strengths in young people and recognize those, and to help build on those, and then create those opportunities for young people to be involved and utilize their voice.

Slide 15: Question 10.1

How can using evidence-based practices improve service experiences of young people you serve? Please type your answer in the text box.

Slide 16: 10.2 – Understanding Best Practices

The next section of this module identifies the distinctive and common features of best practices that are based on positive youth development approaches. These best practices can be a guide to help you work

more effectively with the young people you serve. It will feature video segments in which service providers talk about the ways they incorporate best practices in their work with emerging adults who have experienced mental health difficulties. We begin by introducing the Pathways model of PYD interventions that includes program elements and provider practices.

Slide 17: Pathways Model of PYD Interventions

In the last segment of this module, we reviewed the Pathways Model of Positive Youth Development that includes the elements on the bottom half of this slide. The top three elements of the model, which are in purple boxes, explain the way that interventions build key capacities and support the emergence of a positive identity, values, commitments, and self-efficacy, and finally result in positive outcomes for the young person. The top part of the model also emerged through the evidence-based process we discussed, that included reviewing the literature, extracting key elements of evidence-supported interventions, interviewing service providers and young people who were associated with the interventions, and further refining the model through review by researchers, theorists, service providers, young people and family members (Walker, 2015; Walker & Flower, 2016).

We'll next hear from Janet Walker about the key principles that drive this model. Then we'll discuss the three key elements on the top; that is, program elements, provider factors, and process outcomes, which are associated with providing interventions that support the "virtuous" cycle depicted on the bottom.

Slide 18: Janet Walker on Principles of PYD Interventions [Video Clip]

So the principles that are part of the model probably won't come as a surprise to anyone. Although, when we talked to people and asked them to generate principles, they tended to generate a subset of those. When we asked them to review all the principles, they said, "Oh yeah, those ones are important too." So I think in different specific models, of the sort of total spectrum of principles they emphasize different ones, but the ones that were of course most commonly cited were something along the lines of "*strengths-based*." Then also, of course, "driven by the perspectives of the young person," so individualized, responsive. People refer to that in different ways: "youth-driven," "young adult-driven"—something along those lines. Another a really important part, of course, that is key to these models, is that they are very focused on helping build connections for the young person.

And those are *positive connections* either to people who are supportive of the young person's own self-identified goals (and those could be anything from friends and family), to connections to organizations, which might be organizations that are specific to mental health. I'm thinking of advocacy or peer-run organizations, or maybe organizations in the broader community—a club, or even something more formal like a university or other kind of educational or work place. So, you know, trying to figure out how to support, because we do find that young people that have serious mental health conditions tend to have little *community participation*, broadly speaking, so they're not connected to organizations and they don't have as many connections even to other people. And, of course, when you talk to them, building those positive connections is one of the highest priorities that they typically cite when they are thinking about the goals—both the shorter and longer term goals—that they have for their own lives.

Slide 19: Elements of Effective Programs

Positive developmental interventions are designed to restore or improve the young people's capacity to move positively toward adulthood, despite high levels of risk and challenges. As Janet Walker has just stated, evidence-based programs operate with an emphasis on being strengths-based, individualized, and youth-driven.

In the Pathways model, successful programs serving emerging adults with mental health challenges were identified as having two common elements:

- First, these programs with evidence for success focus on providing a *structured process for assisting young people to make and carry out plans*. This means that young people whose lives have been profoundly affected by their mental health challenges partner with service providers to envision a future they value, and then make plans that are in line with goals they have set for themselves. The young people follow these planning processes and resource analysis with short-term actions that are consistent with their future goals, and may experience success, or learn from failures (Dresser, Clark, & Deschênes, 2015; Lerner et al., 2018).
- Second, programs are designed to *repeat procedures and processes* to ensure that young people *practice* these steps so that they learn skills that they can transfer to other situations outside of the intervention process (Geenen et al, 2015).

We next hear from Dr. Ajit Jetmalani about his work with young people who have experienced great discouragement as a result of their mental health conditions, and the approach he takes to partnering with young people to set goals and reach them.

Slide 20: Ajit Jetmalani Discusses the Importance of Youth-Driven Goals and Priorities [Video Clip]

One of the things that I think is oftentimes missing in the way we approach youth who present with the challenges, that in order for people to feel a sense of *hope* about their future, there needs to be something in their lives that they care about. It's true for any period of our lives that that we need something that we look forward to, that we feel good about doing. But this age group—the transition-age adult—that period of life is all about that. It's all about defining one's identity, implementing strategies that may lead to carrying out that desired outcome. And with some good luck and some hard work, you know, we may be able to achieve what we hoped for in our lives. What happens to youth who are having challenges is that oftentimes they may have been on a trajectory—they may have been experiencing some success, and then something got in their way. Maybe it was a traumatic experience. Maybe it's a mental illness. That “something” that got in their way can knock them off their horse and they've lost their trajectory that they were on. Maybe their self-identification was, “I'm a baseball player,” and oftentimes youth have a fairly narrow identification they try on. They try on that hat for a while and that's what they are for that period of time. Let's say you got knocked off the horse and now your identity is the kid who's depressed, who everybody is worried about, and nobody's satisfied with. The baseball player is long gone, right—we've lost that person. As part of finding hope, we have to remember the hopes and dreams, and what are things that we could do to recapture that or reformulate that. There has to be something to look forward to, and in order to do that, we have to look at *strengths*. We tend to think about the challenges and then come up with strategies that ameliorate or remove barriers, but in order to do that effectively we also have to look at strengths, and remind the young person and also the people around them, “Wait, you know, I know you used to be a baseball

player. What's gotten in your way?" And, "If that's not what you're interested in, let's figure this out. What are we going to do instead?" And that capacity to have success—if that's not part of the strategy or the plan—then it actually is unlikely the person is going to retain the motivation to complete a course of treatment, or course of support.

Slide 21: Provider Factors—Effective Practice

The type of process that was just discussed by Dr. Jetmalani is grounded in key practice principles. We emphasize them here as based in evidence from service providers and young people who have been engaged in successful programs serving young people with mental health challenges.

- First and foremost, successful practice requires that providers work in ways that promote trust on the part of young people. For collaboration to occur, the service provider needs to work in a way that is transparent, reliable, and with follow through on commitments made to the young people, thereby earning their trust.
- Services need to be driven by young people's priorities and perspectives and take a person-centered approach. This requires establishing clear and supportive communication with the young person, and being able to identify their own priorities for their futures, and working through the conflicts and confusion that they may be experiencing.
- Next, the provider takes a "motivational" approach that selectively reinforces changes in behavior, their view of themselves and their own potential, and their relationships with supportive people in their social context. For example, service providers might help young people explore their changing relationships with their families, and help them engage in problem-solving and in strengthening connections with supportive family members.
- Finally, the provider focuses on work that enhances the young person's assets, and builds skills, confidence, competence, and self-efficacy and empowers young people to take charge of their own future (Walker, 2015; Lerner et al., 2018).

In the following video clip, Martin Rafferty, who is Executive Director of Youth MOVE Oregon, talks about the importance of service providers taking a holistic approach that promotes young people's health and well-being, and is connected to their social context.

Slide 22: Martin Rafferty on Holistic and Positive Service Approaches [Video Clip]

We have found that service providers who are looking at the entire picture of the young person are more successful in treatment of the young person, isolating different fields of the social life of the youth, the home life of the youth, the school life. If you don't look at all of these different areas, pay attention to the needs of those areas, and utilize those needs in treatment, it's going to be very difficult to create a treatment plan that's going to work in all of those situations. So looking beyond the medication, looking beyond the therapy, taking into account the big picture.

Slide 23: Key Developmental Assets

In Module 1, we emphasized the importance of partnering with youth and young adults and introduced the idea of service providers working from a positive youth development perspective, as Martin Rafferty just discussed. With a young person who has experienced mental health difficulties, the focus is turned from correcting deficits to building strengths and attaining assets.

Four key types of developmental assets that have been identified through research as critical for emerging adults are:

1. Developing a positive identity and sense of purpose, including self-determination, self-efficacy, and empowerment.
2. Acquiring the capacity, motivation, and self-control to make decisions and carry out plans consistent with personally meaningful goals.
3. Acquiring skills that provide a sense of mastery, aid in leveraging resources, and contribute to the ability to take on adult roles.
4. Developing supportive relationships and social connections that lead to positive experiences (Walker & Gowen, 2011, p 7).

As a service provider, you can create opportunities for young people to develop these assets by partnering with them in your work together.

Slide 24: Other Sets of Key Developmental Assets

Other lists of developmental assets have been proposed and researched. These have been investigated for young people who come from a variety of contexts, but have positive outcomes.

- Richard Lerner and his collaborators have identified assets that are valuable for “positive person-context functioning, which have been called the “five C’s of positive youth development: competence, confidence, character, social connection, and caring (or compassion)” and the sixth C of contributing to the community (Lerner et al., 2002, 2017).
- Martin Rafferty just mentioned the 40 Developmental Assets in the last video segment. This set of developmental assets has been developed and researched by the Search Institute, and has been recognized as having a “direct positive influence on development regardless of risks” (Sesma, Mannees, & Scales, 2013, p. 433) that might be present in a young person’s life. This framework has recently been applied to young adults, and found to predict their thriving when assets are present, and also related to risks and mental health difficulties when absent (Pashak, Handal, & Scales, 2018). The 40 assets are organized into 8 categories:
 - External assets including support, empowerment, boundaries and expectations, and constructive use of time; and
 - Internal assets—commitment to learning, positive values, social competencies, and positive identity.

We need to recognize that some young people live in contexts that are quite difficult—such as unsafe neighborhoods, or areas with substandard schools or few economic opportunities. Service providers need to acknowledge these realities, and foster supportive connections that will help young people build their base of assets to get past these environmental challenges.

We next examine the Pathways model’s third intervention component that can be tracked: *process outcomes*.

Slide 25: Process Outcomes

The final element of the intervention part of the model relates to the process outcomes. Process outcomes refer to two types of intervention characteristics that can be monitored and evaluated as the intervention is being carried out.

The first type of process outcome can track service providers' activities:

- Are the program elements being carried out by the service providers? And are they using the principles of Positive Youth Development in their practices? Research that was used to develop the Pathways Model suggested that fidelity to the principles of practice—such as youth-driven and strengths-based approaches, is crucial.

The second type of process outcome for the Young Persons includes what they are doing and learning. To follow the PYD approach, they should be

- Engaging in proactive steps and activities that feel meaningful and motivating to them, and be able to:
 - Point to steps taken, activities underway, and skills driving their own development (also known as *meta-developmental skills*; Walker, 2015, Figure 1 Pathways Model).

Slide 26: Meta-Developmental Skills

What are some of the specific meta-developmental skills that young people develop as they engage in services that are offered in a positive development framework? After talking with young people and service providers, there is evidence that they acquire skills to:

- Connect to intrinsic motivation (find out what “floats their boat,” and makes them keep trying new things and keep on trying if they experience failure).
- Make choices and select goals as part of the work they do with their service provider.
- Learn to take steps toward desired goals, and develop strategies to attain them.
- Engage with people in their life contexts and learn to benefit from their relationships with family, friends, employers, teachers, and cultural mentors.
- And finally, they learn to manage challenges, setbacks, uncertainty and shifts in perspective (Walker, 2015, figure 1).

We will next hear from Celeste Siebel, who was a service provider with the Achieve My Plan (or AMP) transition program. Her work in AMP helped young people to engage in meaningful and motivating activities and develop the meta-developmental skills that they could use after they left the program.

Slide 27: Celeste Siebel on Self Determination and Social Supports [Video Clip]

[Working within the] positive youth empowerment and development model—we really use two key concepts. The first one is having the young person be a *driver in their own life*. So this means that we really try to get behind the young person around what's important to them, and we help them come up with activities and goals that really are meaningful to them. And these young people—oftentimes they have people in their life that have been making decisions for them and/or influencing the decisions or the activities that they're doing. And so for us, it's really important to convey that what's important to them is what we want to help support them with, to give them an opportunity to really even just think about what their life might look like as emerging adults, young adults. Because oftentimes, they haven't even had space or time to really think about what their goals might be, where they might be heading and what's really important to them. So that's one piece—really helping facilitate that process around the young person being a driver in their own life.

And the other piece is helping the young person *identify supports within their network*. So sometimes young people actually have a pretty clear sense of what their supports are, and who are the people in their lives that can support them and help them work on things that are important to them, or just even be there for emotional support. But other young people aren't aware of who the support network is, or where to turn to find these allies and supports. So, that's another piece: that we try to help the young person make these connections so that they feel really supported in the activities that they want to be doing, as well as just moving forward in their life. And this is a skill set, or these are things that they will take with them, hopefully, that they will realize that these are supports that they can utilize even once the AMP project is done.

Slide 28: Improving PYD Practice

What can you do as a service provider to incorporate Positive Youth Development practices into your work with emerging adults who have mental health difficulties? Some clear paths to improved practice have emerged from our discussion:

- Engage in person-centered planning, by learning about the values and goals of the young person and their desired future.
- Help them work toward that future by building upon and acknowledging their existing strengths.
- Work with them to develop skills and assets through practice, and learning from their successes and failures, and
- Assist young people to develop supportive relationships, and pro-social connections that will build their positive mental health, bolster their resilience, and support their recovery (Masten, 2014; Walker, 2015; Walker & Flower, 2016).

Slide 29: Question 10.2

As a young person, what are the one or two skills you learned that contributed most to your development? Please type your answer in the text box.

Slide 30: Adapting Services Based on Cultural Preferences and Individual Circumstances of Emerging Adults

In the next segment, you will learn about adapting services according to the cultural needs and individual circumstances of young people who have experienced mental health difficulties. First, we will look at exploring the cultural needs of young people, and the types of support that they may need from their families, community members, and other culturally-appropriate sources. If you haven't already done so, we urge you to work through Modules 3, 4, and 5 of this training series. These three modules focus on improving outcomes for young people who are members of the Native American, African-American, or Latino/Hispanic communities. After we discuss specific cultural needs, we move on to consider the importance of looking at other individual circumstances of young people such as being involved with multiple systems like foster care and the juvenile justice system. This section concludes with a discussion of gathering evidence from what has worked in practice, and building individualized services from this practice-based evidence.

Slide 31: Assessing Cultural Needs

This section of the final module acknowledges that many evidence-based practices and positive youth development approaches have not yet been tested for their effectiveness with young people from cultural groups that have been marginalized (Lerner, Wang et al., 2017). Furthermore, there is research that suggests that the low rates of mental health service use and favorable treatment outcomes of young people who are members of these marginalized groups may be due to services not being responsive to their cultural needs (Barrio, 2000; Gone & Trimble, 2012; Keyes et al., 2012, Patterson Silver Wolf et al, 2016; Plaine et al, 2019). However, culturally-focused research studies support the following key practices:

- Understand and honor attitudes, values, and behaviors of young people that are based in their culture (Barrio, 2000).
- Explore the importance of their racial and ethnic identity, immigration history, and home language and work to provide services that acknowledge them (Keyes et al., 2012).
- And recognize that emerging adults from cultural groups that have been marginalized may have denser networks of informal support from their families and community and find ways to incorporate this support as you work with young people toward recovery (Murry et al., 2011).

In the next video segment, researcher and practitioner Dr. Joy DeGruy reflects on the complexity of working with African American young people. She bases her remarks on the theory of triadic influences, which acknowledges three levels of influence on health behavior: individual factors, social factors, and cultural factors (Flay, Snyder, & Petratis, 2009).

Slide 32: Joy DeGruy on the Importance of Culture [Video Clip]

To change your behavior, whether it's a health behavior, mental health behavior—whatever it is, you have to start looking at how a person arrives at the decision to do the behavior. And so looking at this logic model, you realize that there are three realms of influence.

One realm of influence is the *interpersonal*, and all of the person—the personality, the intellect—all of those things we know that influence how this particular individual makes a decision. Most programs in the Black community focus on that one person. They go, “Okay, well, great, it's a kid, and maybe he's got ADHD, or maybe he's struggling with some learning disabilities or whatever it is. I know what we'll do—we'll give him a tutor, maybe we'll get him a mentor, maybe we'll enroll him in extracurricular activities. Maybe we'll have a counselor work with him.” That's great, and you're going to have some results, but if a major influence on him is Pookie—and Pookie is the one he really looks up to, and he really believes in, and he really trusts—then you probably need to talk to Pookie, which I can do up. “Hey Pookie—yeah, you know I'm working with Trayvon here. Yeah, okay so, and you know this is what we're trying to do. Can you help me with that? Can you support him around these?” [Pookie says] “Oh sure I can.” So now there's two streams of influence. We have the interpersonal, and now the personal-social environment—the *interpersonal-social*. So those are great. So if I'm influencing him—and then there's the *social-cultural realm*, and this becomes all of the parts of this kid's, or this family's (whoever are the identified persons)—realm, it's there. Maybe they go to church. Are there community events that they're engaged in? What school do they go to? Do you need to talk to maybe the principal and maybe some of the teachers? Do you need a have a social worker they're working with—maybe you need to talk to the social worker. If they're adjudicated, is there a probation person or some sort of legal advocate that you need to talk to? So now, if you touch all three [realms of influence], then

exponentially, the results in terms of the desired behavior change—it's just going to be exponentially successful.

Slide 33: Informal Support from Families and Community Members

Dr. DeGruy has emphasized that it is not sufficient to work solely with the young person who comes from a culturally diverse community. Her work with African American young people also focuses on building informal support from families and other community members, an approach that has significant evidence for its effectiveness with young people. Research with African American young people has demonstrated some effective approaches to increasing support:

- The Adults in the Making program that engaged rural African American young people and their families provided training to increase parents' supportive behaviors and their ability to help youth to strategize ways to handle discrimination and difficult decisions. As a result of the program young people, even those under high stress, were more likely to avoid risky behaviors than youth from families in the control group, through enhancing self-regulation and avoiding negative emotions. (Brody et al. 2010).
- The Philadelphia Youth Study found that more positive communication with parents helps young men with aggressive behavior keep from increasing mental health difficulties over time (Fite et al, 2014).
- Finally, informal mentors who were non-family members that provided informal social support and positive emotional connections and experiences were linked to lower aggression, less anger, and fewer conduct problems in African American young people (Kogan et al, 2011) and greater success in educational settings (Sanchez et al, 2017).

So, how can we help to build this type of informal social support for young people who have exhausted the patience and resources of family and community members? Joy DeGruy next talks about her approaches to working with families of adjudicated youth who are from the African American community.

Slide 34: Joy De Gruy Discusses Working with Adjudicated Youth [Video Clip]

We have rarely, actually, had parents—and these are like, very hardcore situations that we're dealing with—dealing with kids in terms of criminal behavior, and very rarely have they *actually meant* that “I don't want to deal with them.” What they're *really saying* is, “I don't know how to deal with them. I don't know what to do,” and see, “I'm not going to” is the end result of the frustration that the angst, the fear, the pain, the hurt. And I'm able to go, “Okay, so what would make you willing?,” right, and so we start there. And we start talking about creating a possibility that's not hardship for them, right? See, that's the other piece, is that people are trying to do their lives in the middle of all this. They're trying to survive, keep the lights on, right? So we also provide opportunities, “Okay, you know what we want to do? We want to bring folks together. We're going to provide a babysitter right here in another room, you know, so you can bring your kids. We're going to have food and you don't have to worry about dinner. We're going to talk about what's going to be helpful. Because before you can sit down in the room, we're working with this young person whether you as a parent have decided to or not. We do understand a huge part of them being okay is your being okay and you re-engaging, so we're going to see what everybody needs.”

So we create environments in which we can re-establish those bonds, because we know in terms of mental health, how critical those bonds are, right, to healthy functioning. So we say, “What’s really important—I know, I hear you—it sounds like you’ve given up a lot. It sounds like you struggled a lot. What I want to really congratulate you on hanging in there and having the strength. And no, this is not easy, but we are connected, and whatever connections we can help make we’re going to do.” And again, the program is not mandatory so it’s not something they have to do, and yet they do. They come back over and over and over again, and I think that part of it is that *engagement*. It’s not easy because people—especially people whose spirits are in real depression and helplessness and hopelessness—they can’t even find the energy to get up and show up, right? So sometimes we have to go get them. Sometimes you have to create an environment where it’s just, “We’re just going to be here. It’s not going to be deep. We’re going to have some fun here.” So we actually create these patterns within the programs I’ve dealt with.

Slide 35: Building Culturally-appropriate Informal Supports

Joy DeGruy stressed the importance of supporting family members who may have been exhausted and feel inadequate to deal with the behavior and feelings of young people.

- Recognize the difficulties that the family members have experienced, and their good will.
- Work hard to engage family and informal mentors in programs that give them the knowledge and tools to be supportive.
- Make classes or programs easy to attend by providing for such basic needs as food and child care.

If you’d like more information about working with families and mentors, please complete *Module 9, Promoting support from family, peers, and mentors*, which appears in this training series.

Tailoring services to young people’s cultural preferences and needs is important when using evidence-based practices, but other individual issues must also be taken into account when you work with emerging adults.

Slide 36: Working across Multiple Systems

When young people have become involved with multiple systems, it is important for their service providers to collaborate with workers from other systems to provide needed support for these youth (Chung & Wells, 2010).

Crossover youth with involvement in foster care and juvenile justice systems have multiple challenges, including high rates of untreated mental health and substance abuse difficulties; lack of access to education, employment, economic self-sufficiency, and housing; and deeper penetration into the justice system than their counterparts (Herz, Ryan, & Bilchick, 2010; Byrne et al., 2014).

It is important to develop a strong personal relationship with young people who may be experiencing conflicting priorities and demands from systems that are overloading them with their requirements, and to work in collaboration with service providers in other systems to help young people to achieve their goals (Threlfall et al., 2017; Walsh & Jagers, 2017). Your ongoing outreach, support, and listening may help you to connect them with the type of services they really need to grow into adults (Chiamulera, 2012).

Young people also differ in their service needs in significant ways because of gender, their identity as gay, lesbian, bisexual or transgender, and other factors such as their immigration status, or experience of other disabling conditions. Individualizing services requires careful listening to young people to find out what they consider to be important aspects of their life experience.

These recommendations come in part from studies that have collected evidence directly from those who are working in the field. We finish this section of the module with a consideration of practice-based evidence.

Slide 37: Practice-Based Evidence

In addition to evidence-based practices that establish effectiveness of services through carefully designed and controlled research, there is growing recognition of the importance of learning from practices that seem to be successful, and helping to establish evidence of their success (Crooks et al., 2017).

Practice-based evidence involves using information from service providers, family members, and service users about effective interventions, and possibilities for program or practice improvements.

When gathered in collaboration with culturally-diverse communities, practice-based evidence can lead to the identification of desirable outcomes and cultural practices that lead to healthy adult lives. Finding Our Way, a project led by Terry Cross, founding Executive Director of the National Indian Child Welfare Association and Barbara Friesen of the Pathways Research and Training Center, has employed a practice-based evidence approach. Collaborating with the Native American Youth and Family Center, a culturally-based organization, they identified community-preferred interventions including traditional healing practices to support community-defined outcomes marking a successful transition to adulthood for Native American young people (Cross, Friesen, et al., 2011; Friesen, Cross et al., 2015).

Slide 38: Skills to Individualize Services and Recognize Context

There is growing recognition of the importance of individualizing the services that are offered to youth and young adults experiencing mental health difficulties (Ng & Weisz, 2016). Against the backdrop of providing services that are evidence-based, what skills do you need as a service provider to individualize your services and recognize the contexts that young adults bring with them?

Taking a positive developmental approach, service providers need to:

- Recognize and prioritize the cultural and ethnic preferences of young people.
- Partner with young people to work toward the goals they identify as appropriate given their social identities.
- Collaborate with service providers in other systems that involve the young person.
- Learn what appears to be working in your practice with individuals, and incorporate key elements in your future work.

Slide 39: Question 10.3

What do you believe are the greatest challenges when working with young people involved in multiple service systems? Please check your top 2 or 3 challenges.

Slide 40: 10.4 – Developing Knowledge and Skills to Evaluate and Improve Programs in Partnership with Young People

In the final section of this module, we will consider ways in which service providers can partner with young people to evaluate and improve their programs and services. We'll begin by discussing program evaluation.

Slide 41: What is Program Evaluation?

Simply put, program evaluation is the process of gathering information to determine whether a program's goals are being met (Patton, 2008). Collaborative evaluation is an approach that "actively engages program stakeholders as members of the evaluation team" (O'Sullivan, 2012, p. 519). Key stakeholders such as young people, service providers, and program administrators have learned to use evaluation tools to help plan, implement, and improve the quality of services (Cousins et al., 2014).

Slide 42: Youth-led Evaluation

It is important to recognize that some of the best information about programs comes from those people who have the most at stake—those receiving services. Young people are increasingly getting involved in research and evaluation, and can provide authentic feedback on service needs and practices, as well as serve as interviewers gathering candid data from their peers (Bulenda et al., 2013, 2015).

Participating in the evaluation process can be empowering, and provide opportunities for young people to develop social skills, self-confidence, and job readiness skills (Sabo Flores, 2008). Whenever possible, youth should receive some compensation for engaging in this process, to recognize the value of their contributions (Delgado, 2006).

Youth led-evaluation also provides a greater sense of control over their own lives and communities (Delgado, 2006).

Some challenges to youth-led research have also been identified: for those not of legal age, permission to participate will need to be secured. Young people may also experience some intimidation due to power differentials they experience with service providers, administrators, and researchers, and ethical concerns dictate that care be taken to avoid coercing young people to disclose information (Schelbe et al., 2015). However, the advantages of having young people collaborate in evaluation have been well established.

In the next video segment, Martin Rafferty of Oregon Youth MOVE takes a hard look at program evaluation that involves emerging adults.

Slide 43: Martin Rafferty on Program Evaluation [Video Clip]

We have to really look at what the outcomes are. We can't just get a young person a job. That's not good enough. We have to make sure that *that* young person is successful in their job. We have to look at the actual outcomes—and not just how we're getting there, but what happens five years later, what happens ten years later.

Slide 44: Quality Improvement and Youth Participation

We need to take Martin's cautions to heart and work to improve the quality of our services so that young people can be successful in their adult lives. Service providers need to engage in quality improvement, which means they commit themselves to:

- A long-term, ongoing process of continuous service development, adaptation, and experimentation.
- Remaining sensitive to both the quality of their service processes and the outcomes for the young people they serve, as well as unintended results and side effects (Patton, 2015).

From the perspective of proven best practices, quality improvement should also involve partnerships with young people to improve the quality and outcomes of services they receive. Inclusion of youth through meaningful participation in the process of designing, evaluating, and improving services is crucial. This means moving away from "lip service" to actual power-sharing with young people in decision making (Blakeslee & Walker, 2018; Walker et al., 2018).

In the following video clip, Lacy Kendrick Burk, the former Executive Director of Youth MOVE National, talks about her own experience and efforts as a young person to improve services, and the role of Youth MOVE National in providing young adults' voices in conversations about service re-design and improvements.

Slide 45: Lacy Kendrick-Burk on Young People Working in Partnership to Improve Systems [Video Clip]

Youth MOVE National, which stands for Youth Motivating Others through Voices of Experience, is a national youth-led organization where we work to unite the voices and causes of young people across systems. Those systems include mental health, child welfare, juvenile justice, education, and substance abuse, as well as others. What we do at Youth MOVE is to make sure that young people are supported in developing the necessary skills they need to be able to represent their voice, and also to work with systems and adults to ensure that they're ready to hear *youth voice* and then bring those two together to create *positive change*. So I have been, as one could call it, a "*youth advocate*" for 11 years now. I have been working on ensuring youth voice across systems and in systems development and implementation and evaluation and youth leadership for quite some time. I learned how to use my personal story and my experience in child welfare and mental health from trial and error often. I had some really great adult supports, and so I learned to utilize my voice to create positive change, not only with my story but representing the stories of other young people and then providing solutions to what needed to happen to make these systems better. And so, I have utilized my story in the past and now I work and focus on making sure that other young people have that support process, and also that they have access to older advocates and peers and mentors so that they have that same skill set. So my generation of young advocates has kind of paved the way and knocked down some walls and doors so that youth voice will be heard, and we sort of established that. And so now, I work to make sure that the next generation comes up and builds on that and makes sure that it continues.

Slide 46: Skills to Support Program Evaluation and Improvement

What can you do to support program evaluation and improvement for the services you are providing?

As a service provider you can:

- Partner with young people so that they are empowered to collaborate in evaluations, to give candid assessments of their service experiences, and to suggest improvements and innovations
- Engage as a stakeholder in evaluation of the services you offer, providing feedback on processes and outcomes.
- Maintain flexibility and engage in service innovations, while adding your voice to the assessment of their effectiveness.
- And finally, build your own capacity to use lessons learned from evaluation and quality improvement processes in your organization. Provide information, data, and feedback for these processes, and engage in the change processes that result from what the young people, other service providers, and you have learned (Bulanda et al., 2013; Walker et al., 2018).

Slide 47: References and Resources

We have prepared a reference list that includes research and practice articles that we have used in preparing this module. We also have provided a resource list that includes many key publicly available resources regarding using evidence-based practices in your services, individualizing services for young people from diverse cultural backgrounds and with multiple system involvement, and engaging in productive program evaluation and quality improvement efforts.

Slide 48: Acknowledgements

We'd like to acknowledge and thank the people who contributed to the development of this module on using evidence-supported practices and individualizing interventions.

Slide 49: Funders

The contents of this module were developed through funding from the National Institute on Disability, Independent Living, and Rehabilitation Research, and from the Center for Mental Health Services.

Slide 50: Module 10 Quiz

Please complete each of the 10 questions as part of your training experience for Module 10. Please check the one BEST answer for each question.

Participants who successfully complete this final part of the training will be able to print out a certificate of completion.